June 1

PTO/SB/30 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Tradement Office: U.S. DEPARTMENT OF COMMERCE

Uniter the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMOCALON OF BRIGHTIES LEST CERUSS	it displays it valid OMD control (timber.	
Application Number	09/751,078	
Filing Date	12/29/2000	
First Named Inventor	Ravlidra R. Mantena	
Art Unit	3621	
Exeminer Name	Warjioh, Jalaice	
Allomey Docket Number	YOR920000551UNI	

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO ) on page 2.

		AT SHEET IST NOTES (IID) III	30 0001111	that we are ospito jon pa		
Submission required under 37 CFR 1.114     Note: If the RCE is proper, any previously filed unentered and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).  a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.  I. Consider the arguments in the Appeal Brief or Reply Brief previously filed on  ii. Other						
b. Senciosed i. Amendment/Reply ii. Information Disclosure Statement (IDS) ii. Affidavit(s)/Declaration(s) iv. Other Non-Entry Request  2. Miscellaneous a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required) b. Other						
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.  a. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 50-0510 (IBM)  i. RCE fee required under 37 CFR 1.17(e)  iii. Extension of time fee (37 CFR 1.136 and 1.17)  iiii. Other  b. Check in the amount of \$ enclosed  c. Payment by credit card (Form PTO-2038 enclosed)  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED						
Name (Print / Type)	Wayno F. Reinke		_	ration No. (Attorney/Agent)	36,650	
Signature	Worgan 7.	Rin	Date	November 5, 2004		
CERTIFICATE OF MAILING OR TRANSMISSION  Itereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mall in envelope addressed to: Mail Stop RCE, Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.						
ama (Print/Type) Wayne F. Reiake						
Signature	Wyn7.	1hi	Date	November 5. 2004		
de collection of information to c						

True collection of difformation is required by 37 CFR 1.114. The Information is required to obtain or relain a barrefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND PEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissionar for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in complating the farm, call 1-800-PTO-8199 and select option 2.

PAGE 3/21 \* RCVD AT 11/5/2004 5:27:51 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-1/1 \* DNDS:8729305 \* CSID:518 452 5579 \* DURATION (mm-ss):07-28

11/29/2004 SWILLIAM 00000015 500510 09751078

01 FC:1801

790.00 DA

02 FC:1201 ∇°V 176.00 DA

18

## PATENT APPLICATION FEE DETERMINATION RECORD 09751078 Effective October 1, 2000 **CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN** (Column 1) (Column 2) TYPE [ **SMALL ENTITY** OR **TOTAL CLAIMS** RATE FEE RATE FEE FOR OR BASIC FEE NUMBER FILED **NUMBER EXTRA BASIC FEE** 355.00 710.00 TOTAL CHARGEABLE CLAIMS minus 20= 25 X\$ 9= X\$18= OR D INDEPENDENT CLAIMS minus 3 = X40 =X80= OR MULTIPLE DEPENDENT CLAIM PRESENT +135= +270= OR \* If the difference in column 1 is less than zero, enter "0" in column 2 **TOTAL** TOTAL OR **CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY SMALL ENTITY** OR (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-⋖ REMAINING NUMBER **PRESENT** RATE TIONAL RATE TIONAL MENDMENT **AFTER PREVIOUSLY EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus WO X\$ 9= X\$18= OR Independent Minus X80= X40 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= +270= ØΒ TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-8 ADDI-REMAINING NUMBER PRESENT ENDMENT RATE TIONAL RATE TIONAL **AFTER PREVIOUSLY EXTRA AMENDMENT** PAID FOR FEE FEE Total 60 45 Minus 15 X\$ 9= X\$18= OR 210 Independent Minus X40= X80= 76 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= +270= OR TOTAL TOTAL OR 446 ADDIT. FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-ပ REMAINING NUMBER PRESENT TIONAL MENDMENT **AFTER PREVIOUSLY** RATE RATE TIONAL **EXTRA AMENDMENT** PAID FOR FEE FEE **Total** Minus X\$ 9= X\$18= OR Independent Minus X40= X80 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135 =+270= OR " If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." OR ADDIT. FEE ADDIT. FEE ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**Application or Docket Number**